Bill

Received: 01/15/2009 Wanted: As time permits					Received By: rryan				
					Identical to LRB:				
For: Ad	lministration-B	Budget	By/Representing: Palchik Drafter: rryan						
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May Contact:					Addl. Drafters:				
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/2	rryan 01/27/2009	nnatzke 01/27/2009	rschluet 01/27/20	09	mbarman 01/27/2009		S&L		
/3	rryan 01/30/2009	nnatzke 01/30/2009	jfrantze 01/30/20	09	sbasford 01/30/2009				

FE Sent For:

Bill

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2009-11 Budget Bill Statutory Language Drafting Request

• Topic: Birth to 3 Waiver

Tracking Code: See BB0422

SBO team: Health and Insurance

SBO analyst: Laurie Palchik

• Phone: 266-2214

• Email: laurie.palchik@wisconsin.gov

Agency acronym: DHS

• Agency number: 435

• Priority (Low, Medium, High): High

Intent: See attached paper for minor change at bottom "Amend s.20.435(7)(im)...



Department of Health Services 2009-2011 Biennial Budget Statutory Language Request January 17, 2009

49.46(2)(6)8.

Birth to 3 Waiver

Current Language

The Department currently provides the Birth to 3 Program under the authority of ss. 51.44. Federal statutes permit states to claim federal Medicaid matching funds on expenditures for Medicaid-covered services provided to infants and toddlers under Individualized Family Service Plans (IFSP) developed pursuant to federal Birth to 3 laws. Approximately 40% of children participating in the Birth to 3 Program have Wisconsin Medicaid as an insurance source.

Wisconsin currently has a number of Medicaid home and community-based waiver programs for children needing long term care services, which provides for expanded services under Medicaid and applies less restrictive income standards for eligibility. Because of a limited number of children's waiver slots, counties have been reluctant to use limited slots for children in the Birth to 3 Program. Federal regulations prohibit removing a participant from a waiver program once granted participation.

Wisconsin could apply for a separate home and community-based waiver program that would be limited to children 1 to 3 years old. Such a program would be attractive to counties since counties must serve children in the federal Birth to 3 Program and counties would not be obligated to continue waiver services once the child turns 4 years old.

It is projected that an additional 20% of the children in Birth to 3 Program would gain Medicaid eligibility under the less-restrictive eligibility standards of the home and community based wavier program. In addition, more of the services under the Birth to 3 Program would be eligible for coverage under Medicaid.

Proposed Change

Require the Department to pursue a home and community based waiver program for children 3 years old and younger, and amend s. 49.46(2)(a)(8) to include that waiver as part of the state's Medicaid program. Require counties to supply the non federal share match for Medicaid expenditures under the waiver program, but allow counties to use state dollars provided under s. 20.435 (7)(bf) for the non federal share. All federal funds received under the new waiver program minus the cost of obtaining and maintaining the waiver program, including up to one position, would be paid to the county's Birth to 3 program.

Amend s. 20.435(7)(im) to include the payment of obtaining and maintaining the Birth to 3 waiver program, including up to one position, through federal funds received under the waiver. Amend s. 2007-2009 Statutory Language Request Page 1

20.435(4)(0) to transfer federal funds received through the waiver to s. 20.435(7)(im) to cover these payments.

Desired Effective Date:

upon passage

Agency:

DHS

Agency Contact:

Michael Pancook

Phone:

266-9364

2009-11 Budget Bill Statutory Language Drafting Request

• Topic: Birth to 3 Waiver

Tracking Code: BB0433

SBO team: Health and Insurance

SBO analyst: Laurie Palchik

• Phone: 266-2214

• Email: laurie.palchik@wisconsin.gov

Agency acronym: DHS

Agency number: 435

• Priority (Low, Medium, High): High

Intent: See Attached paper under proposed change.



Department of Health Services 2009-2011 Biennial Budget Statutory Language Request January 15, 2009

Birth to 3 Waiver

Current Language

The Department currently provides the Birth to 3 Program under the authority of ss. 51.44. Federal statutes permit states to claim federal Medicaid matching funds on expenditures for Medicaid-covered services provided to infants and toddlers under Individualized Family Service Plans (IFSP) developed pursuant to federal Birth to 3 laws. Approximately 40% of children participating in the Birth to 3 Program have Wisconsin Medicaid as an insurance source.

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Desired Effective Date:

upon passage

Agency:

DHS

Agency Contact: Phone:

Michael Pancook

e: 266-9364

STATE OF WISCONSIN - LEGISLATIVE REFERENCE BUREAU

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Research (608-266-0341)

Library (608-266-7040)

Legal (608-266-3561)

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From:

Palchik, Laurie A - DOA [laurie.palchik@wisconsin.gov]

Sent:

Wednesday, January 21, 2009 9:51 AM

To: Subject:

Ryan, Robin Birth to 3 Waiver

Hi Robin,

I called DHS to check and they confirmed what you thought, it should state Birth to 3 not 1 to 3. Thank you for checking and sorry about this inconvenience!

Laurie A. Palchik
Executive Policy and Budget Analyst
Division of Executive Budget and Finance Department of Administration
608-266-2214 (w); 608-267-0372 (f)

----Original Message----

From: Pancook, Michael J - DHS

Sent: Wednesday, January 21, 2009 9:48 AM

To: Palchik, Laurie A - DOA

Subject: B to 3

Yes it should be birth to 3 not 1 to 3.

Michael Pancook Budget and Policy Analyst Office of Policy Initiatives and Budget Wisconsin Department of Health Services 608 266-9364 Michael.Pancook@dhfs.wisconsin.gov

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NOTICE: This email and any attachments may contain confidential information. Use and further disclosure of the information by the recipient must be consistent with applicable laws, regulations and agreements. If you received this email in error, please notify the sender; delete the email; and do not use, disclose or store the information it contains.

From:

Cady, Dean

Sent:

Tuesday, January 20, 2009 2:59 PM

To: Subject:

Ryan, Robin LRB 0920

Hi Robin, this is dean from Representative Vukmir's office. The drafter's note for LRB 0920, you ask three questions regarding the legislation:

1. Concerning 146.903(3)(c) 3; it should apply to 3(a) and (b).

- 2. Yes, that is what she intends because there is no retro-active under BadgerCare Plus (see the definition of Medical Assistance).
- 3. Yes, please incorporate the amendment.

That's it, as always Thankx a mil for all the help. Let me know if you have any other questions. deano

From:

Kieper, Cynthia

Sent:

Tuesday, January 20, 2009 9:02 AM

To: Subject:

Ryan, Robin RE: LRB 0747/1

Hello Robin;

I believe the perjury and interference with law enforcement is an excellent place to start.

Cynthia

From: Ryan, Robin

Sent: Tuesday, January 13, 2009 1:06 PM

To: Kieper, Cynthia **Cc:** Malaise, Gordon **Subject:** FW: LRB 0747/1

Hi Cynthia,

Could you spell out further what behavior you want to criminalize? Are you saying you want to make it a crime for person A to do something that makes is appear that person B committed a crime, but only if person B is charged with committing a crime, and person B did not commit the crime. Further would person A have to have a specific intent that person B's name be used in CCAP? Perjury and interference with law enforcement are criminalized under subch. III and IV of ch. 946. Perhaps you could look at those provisions as the basis for what you want to do?

Robin Ryan

From: Sent:

Malaise, Gordon

io: Ryan

To: Subject: Tuesday, January 13, 2009 12:50 PM

Ryan, Robin FW: LRB 0747/1

From:

Kieper, Cynthia

Sent:

Monday, January 12, 2009 12:52 PM

To:

Malaise, Gordon; Kieper, Cynthia

Subject:

LRB 0747/1

Dear Sir;

The Representative would like to redraft LRB 0747/1 to include "If a person attempts to commit fraud (fake a crime) for the sole purpose of getting someone's name on CCAP, there should be a penalty).

He is wondering if it's possible to make this the lowest class felony or highest class misdemeanor depending; allowing the judge some flexibility.

Thank you.

Cynthia L. Kieper



State of Misconsin 2009 - 2010 LEGISLATURE

In 1/21/09

LRB-1542 RLR:::...

nwn

DOA:.....Palchik, BB0422 - Birth to 3 waiver

FOR 2009-11 BUDGET -- NOT READY FOR INTRODUCTION.

1

AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau **HEALTH AND HUMAN SERVICES**

MEDICAL ASSISTANCE

Currently, DHS administers the Birth to 3 Program to provide early intervention services to infants and toddlers with developmental delays or disabilities and to their families.

This bill requires DHS to request a waiver of federal Medicaid law to allow the state to provide home and community-based services under MA to children who participate in the Birth to 3 Program. The bill provides that if the waiver is granted. counties must pay the nonfederal share of MA costs for services provided under the waiver. The bill appropriates a specified amount of federal MA moneys received for services provided under the waiver to DHS for administering the waiver, and provides that DHS shall distribute the remainder of those federal moneys to counties that provide services under the waiver.

For further information see the state and local fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

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SECTION 1. 20.435 (4) (o) of the statutes is amended to read:

20.435 (4) (o) Federal aid; medical assistance. All federal moneys received for meeting costs of Medical Assistance administered under ss. 46.284 (5) and 49.665 and subch. IV of ch. 49, to be used for those purposes and, for transfer to the Medical Assistance trust fund, for those purposes, and to transfer to the appropriation account under s. 20.435 (7) (im) \$19,100 in fiscal year 2009-10 and \$20,900 in fiscal year 2010-11.

1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 76, 98, 99, 168, 183, 377, 437, 445, 446, 450, 469, 479, 490, 491; 1995 a. 27 ss. 806 to 961r, 9126 (19); 1995 a. 73, 798; 1995 a. 27 ss. 211, 214, 216, 217, 527 to 609; 1997 a. 35, 105, 231, 237, 280, 293; 1999 a. 5, 9, 32, 52, 84, 103, 109, 113, 133, 185, 186; 2001 a. 16, 69, 103, 105; 2003 a. 33, 139, 186, 318, 320, 326, 327; 2005 a. 15, 22; 2005 a. 25 ss. 299 to 331, 2498 to 2500, 2510; 2005 a. 74, 107, 199, 228, 264, 388, 406, 434; 2007 a. 20 ss. 331 to 422, 9121 (6) (a); 2007 a. 39, 88, 107, 111, 130; s. 13.92 (2) (i).

SECTION 2. 20.435 (7) (im) of the statutes is amended to read:

20.435 (7) (im) Community options program; family care benefit; recovery of costs; birth to 3 waiver administration. From the moneys received from the recovery of costs of care under ss. 46.27 (7g) and 867.035 and under rules promulgated under s. 46.286 (7) for enrollees who are ineligible for medical assistance, all moneys not appropriated under sub. (4) (in), and all moneys transferred to this appropriation account from the appropriation account under sub. (4) (0), for payments to county departments and aging units under s. 46.27 (7g) (d), payments to care management organizations for provision of the family care benefit under s. 46.284 (5), payment of claims under s. 867.035 (3) and, payments for long-term community support services funded under s. 46.27 (7) as provided in ss. 46.27 (7g) (e) and 867.035 (4m), and for administration of the waiver program under s. 46.99.

History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 to 173, 732 (1), (2); 1975 c. 41 s. 52; 1975 c. 82, 224, 292; 1975 c. 413 s. 18; 1975 c. 422, 423; 1975 c. 430 ss. 1, 2, 80; 1977 c. 29 ss. 236 to 273, 1657 (18); 1977 c. 112; 1977 . 203 s. 106; 1977 c. 213, 233, 327; 1977 c. 354 s. 101; 1977 c. 359; 1977 c. 418 ss. 129 to 137, 924 (18) (d), 929 (55); 1977 c. 428 s. 115; 1977 c. 447; 1979 c. 32 s. 92 (11); 417, 440, 448, 464, 468; 1997 a. 27 ss. 211, 214, 216, 217, 527 to 609; 1997 a. 35, 105, 231, 237, 280, 293; 1999 a. 5, 9, 32, 52, 84, 103, 109, 113, 133, 185, 186; 2001 a. 16,

69, 103, 105; 2003 a. 33, 139, 186, 318, 320, 326, 327; 2005 a. 15, 22; 2005 a. 25 ss. 299 to 331, 2498 to 2500, 2510; 2005 a. 74, 107, 199, 228, 264, 388, 406, 434; 2007 a. 20 ss. 331 to 422, 9121 (6) (a); 2007 a. 39, 88, 107, 111, 130; s. 13.92 (2) (i).

****NOTE: This Section involves a change in an appropriation that must be

reflected in the revised schedule in s. 20.005, stats.

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1	SECTION 3. 46.99 of the statutes is created to read:
2	46.99 Medical assistance waiver for Birth to 3 participants. (1) In this
3	section, "medical assistance" means the program under subch. IV of ch. 49.
4	(2) The department shall request from the secretary of the U.S. department of
5	health and human services a waiver under 42 USC 1396n (c) that authorizes the
6	department to provide home or community-based services under medical assistance
7	to children who receive early intervention services under s. 51.44.
8	(3) If the waiver requested under sub. (1) is granted, counties shall provide the
9	nonfederal share of costs for medical assistance services provided under the waiver.
10	Counties may used moneys appropriated under s. 20.435 (7) (bt) and distributed to
11	counties under s. 51.44 (3) (a) to provide the nonfederal share of medical assistance
12	costs. 20.435
13)	(4) From the appropriation account under s. 20.436 (4) (o), the department
14	shall distribute to counties that provide services under this section the amount of
15	federal moneys received by the state as the federal share of medical assistance for
16	those services, minus the amount transferred to the appropriation account under s.
17	20.435 (7) (im) for the department's costs of administering this section. Counties
18	shall use moneys distributed under this section to provide serivices under this
19	section or s. 51.44.
20	SECTION 4. 49.46 (2) (b) 8. of the statutes is amended to read:
21	49.46 (2) (b) 8. Home or community-based services, if provided under s. 46.27

(11), 46.275, 46.277, 46.278, or 46.2785, 49.99, or under the family care benefit if a

SECTION 4

- waiver is in effect under s. 46.281 (1d), or under the disabled children's long-term 1
- support program, as defined in s. 46.011 (1g). 2

History: 1971 c. 125, 211, 215; 1973 c. 90, 147; 1975 c. 39; 1977 c. 29 ss. 592m, 1656 (18); 1977 c. 389, 418; 1979 c. 34, 221; 1981 c. 20, 93, 317; 1983 a. 27; 1983 a. 189 s. 329 (5); 1983 a. 245 ss. 10, 15; 1983 a. 538; 1985 a. 29, 120, 176, 253; 1987 a. 27, 307, 339, 399, 413; 1989 a. 9; 1989 a. 31 ss. 1454d to 1460 and 2909g, 2909i; 1989 a. 122, 173, 333, 336, 351; 1991 a. 39, 178, 269, 316; 1993 a. 16, 99, 269, 277, 446, 450, 491; 1995 a. 27, 77, 164, 289, 303, 457; 1997 a. 27, 35, 105, 237; 1999 a. 9; 2001 a. 16; 2003 a. 33; 2005 a. 25, 253; 2007 a. 20, 91.

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRB-1542/1dn RLR:.|..... NWn

Date

Laurie Palchik:

Under the draft, children who receive services under Birth to 3 are eligible for services under the waiver. Should the draft instead make children who are eligible for Birth to 3 eligible for services under the waiver?

Robin Ryan Legislative Attorney Phone: (608) 261-6927

E-mail: robin.ryan@legis.wisconsin.gov

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRB-1542/1dn RLR:nwn:rs

January 21, 2009

Laurie Palchik:

Under the draft, children who receive services under Birth to 3 are eligible for services under the waiver. Should the draft instead make children who are eligible for Birth to 3 eligible for services under the waiver?

Robin Ryan Legislative Attorney Phone: (608) 261-6927

E-mail: robin.ryan@legis.wisconsin.gov

From: Palchik, Laurie A - DOA [laurie.palchik@wisconsin.gov]

Sent: Tuesday, January 27, 2009 8:24 AM

To: Ryan, Robin

Subject: FW: LRB Draft: 09-1542/1 Birth to 3 waiver

Hi Robin,

The final change for Birth to 3 waiver below.

From: Walske, Theresa M - DHS

Sent: Monday, January 26, 2009 3:47 PM

To: Megna, Richard H - DHS; Forsaith, Andrew C - DHS; Wroblewski, Beth M - DHS

Cc: Pancook, Michael J - DHS; Bryda, Julie A - DHS Subject: RE: LRB Draft: 09-1542/1 Birth to 3 waiver

Thank you for the opportunity to look at the bill.

I connected with Beth, the concern is that not all children eligible for Birth to 3 will be eligible for the Waiver. The Waiver takes into consideration the child's level of care. Our projections indicated that 60% of the children in Birth to 3 would qualify for the waiver. The remaining 40% would be served and funded through the federal and state allocation and local match as well as private insurance or BadgerCare Plus (not acquired through the Waiver).

And it is our intent that only children enrolled in Birth to 3 are on the waiver. This way we can be confident that we are meeting the waiver requirements.

Based on this information, here is our proposed word changes.

Page 3, line 4, change to read, "who meet the criteria for the home or community-based waiver and are enrolled in early intervention services under s. 51.44."



State of Misconsin 2009 - 2010 LEGISLATURE

LRB-1542/1
RLR:nwn:rs

In 1/27/09

DOA:.....Palchik, BB0422 - Birth to 3 waiver

FOR 2009-11 BUDGET -- NOT READY FOR INTRODUCTION

AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

Currently, DHS administers the Birth to 3 Program to provide early intervention services to infants and toddlers with developmental delays or disabilities and to their families.

This bill requires DHS to request a waiver of federal Medicaid law to allow the state to provide home and community-based services under MA to children who participate in the Birth to 3 Program. The bill provides that if the waiver is granted, counties must pay the nonfederal share of MA costs for services provided under the waiver. The bill appropriates a specified amount of federal MA moneys received for services provided under the waiver to DHS for administering the waiver, and provides that DHS must distribute the remainder of those federal moneys to counties that provide services under the waiver.

For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

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SECTION 1. 20.435 (4) (o) of the statutes is amended to read:

20.435 (4) (o) Federal aid; medical assistance. All federal moneys received for meeting costs of Medical Assistance administered under ss. 46.284 (5) and 49.665 and subch. IV of ch. 49, to be used for those purposes and, for transfer to the Medical Assistance trust fund, for those purposes, and to transfer to the appropriation account under s. 20.435 (7) (im) \$19,100 in fiscal year 2009–10 and \$20,900 in fiscal year 2010–11.

Section 2. 20.435 (7) (im) of the statutes is amended to read:

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****Note: This Section involves a change in an appropriation that must be reflected in the revised schedule in s. 20.005, stats.

Section 3. 46.99 of the statutes is created to read:

46.99 Medical assistance waiver for Birth to 3 participants. (1) In this section, "medical assistance" means the program under subch. IV of ch. 49.

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- (2) The department shall request from the secretary of the U.S. department of health and human services a waiver under 42 USC 1396n (c) that authorizes the provision of home or community-based services under medical assistance to children who receive early intervention services under s. 51.44.
- (3) If the waiver requested under sub. (2) is granted, counties shall provide the nonfederal share of costs for medical assistance services provided under the waiver. Counties may use moneys appropriated under s. 20.435 (7) (bt) and distributed to counties under s. 51.44 (3) (a) to provide the nonfederal share of medical assistance costs.
- (4) From the appropriation account under s. 20.435 (4) (o), the department shall distribute to counties that provide services under this section the amount of federal moneys received by the state as the federal share of medical assistance for those services, minus the amount transferred to the appropriation account under s. 20.435 (7) (im) for the department's costs of administering this section. Counties shall use moneys distributed under this section to provide services under this section or s. 51.44.

SECTION 4. 49.46 (2) (b) 8. of the statutes is amended to read:

49.46 (2) (b) 8. Home or community-based services, if provided under s. 46.27 (11), 46.275, 46.277, 46.278, or 46.2785, 46.99, or under the family care benefit if a waiver is in effect under s. 46.281 (1d), or under the disabled children's long-term support program, as defined in s. 46.011 (1g).

(END)

n-note

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRB-1542/2dn RLR::.... NWM

Date

Laurie Palchik:

I did not use the precise wording DHS suggested. I added a condition specifying that the waiver is for children who are eligible for MA, which includes eligibility under waivers, because the waivers are listed as covered services in subch. IV of ch. 49.

Rather than providing that the waiver is for children "enrolled" in early intervention services under s. 51.44, I kept the description from the prior draft, "children who receive" early intervention services under s. 51.44 because s. 51.44 refers to receiving services rather than enrollment.

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DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRB-1542/2dn RLR:nwn:rs

January 27, 2009

Laurie Palchik:

I did not use the precise wording DHS suggested. I added a condition specifying that the waiver is for children who are eligible for MA, which includes eligibility under waivers, because the waivers are listed as covered services in subch. IV of ch. 49.

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State of Misconsin 2009 - 2010 LEGISLATURE

LRB-1542/2 RLR:nwn:rs

DOA:.....Palchik, BB0422 - Birth to 3 waiver

FOR 2009-11 BUDGET -- NOT READY FOR INTRODUCTION

An ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

Currently, DHS administers the Birth to 3 Program to provide early intervention services to infants and toddlers with developmental delays or disabilities and to their families.

This bill requires DHS to request a waiver of federal Medicaid law to allow the state to provide home and community-based services under MA to children who participate in the Birth to 3 Program. The bill provides that if the waiver is granted, counties must pay the nonfederal share of MA costs for services provided under the waiver. The bill appropriates a specified amount of federal MA moneys received for services provided under the waiver to DHS for administering the waiver, and provides that DHS must distribute the remainder of those federal moneys to counties that provide services under the waiver.

For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

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SECTION 1. 20.435 (4) (o) of the statutes is amended to read:

20.435 (4) (o) Federal aid; medical assistance. All federal moneys received for meeting costs of Medical Assistance administered under ss. 46.284 (5) and 49.665 and subch. IV of ch. 49, to be used for those purposes and, for transfer to the Medical Assistance trust fund, for those purposes, and to transfer to the appropriation account under s. 20.435 (7) (im) \$19,100 in fiscal year 2009–10 and \$20,900 in fiscal year 2010–11.

SECTION 2. 20.435 (7) (im) of the statutes is amended to read:

20.435 (7) (im) Community options program; family care benefit; recovery of costs; birth to 3 waiver administration. From the moneys received from the recovery of costs of care under ss. 46.27 (7g) and 867.035 and under rules promulgated under s. 46.286 (7) for enrollees who are ineligible for medical assistance, all moneys not appropriated under sub. (4) (in), and all moneys transferred to this appropriation account from the appropriation account under sub. (4) (0), for payments to county departments and aging units under s. 46.27 (7g) (d), payments to care management organizations for provision of the family care benefit under s. 46.284 (5), payment of claims under s. 867.035 (3) and, payments for long-term community support services funded under s. 46.27 (7) as provided in ss. 46.27 (7g) (e) and 867.035 (4m), and for administration of the waiver program under s. 46.99.

 $****Note: This Section involves a change in an appropriation that must be reflected in the revised schedule in s. 20.005, stats.$

Section 3. 46.99 of the statutes is created to read:

46.99 Medical assistance waiver for Birth to 3 participants. (1) In this section, "medical assistance" means the program under subch. IV of ch. 49.

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(2) The department shall request from the secretary of the U.S. department of
health and human services a waiver under 42 USC 1396n (c) that authorizes the
provision of home or community-based services under medical assistance to children
who are eligible for medical assistance and receive early intervention services under
s. 51.44.

- (3) If the waiver requested under sub. (2) is granted, counties shall provide the nonfederal share of costs for medical assistance services provided under the waiver. Counties may use moneys appropriated under s. 20.435 (7) (bt) and distributed to counties under s. 51.44 (3) (a) to provide the nonfederal share of medical assistance costs.
- (4) From the appropriation account under s. 20.435 (4) (o), the department shall distribute to counties that provide services under this section the amount of federal moneys received by the state as the federal share of medical assistance for those services, minus the amount transferred to the appropriation account under s. 20.435 (7) (im) for the department's costs of administering this section. Counties shall use moneys distributed under this section to provide services under this section or s. 51.44.

SECTION 4. 49.46 (2) (b) 8. of the statutes is amended to read:

49.46 (2) (b) 8. Home or community-based services, if provided under s. 46.27 (11), 46.275, 46.277, 46.278, or 46.2785, 46.99, or under the family care benefit if a waiver is in effect under s. 46.281 (1d), or under the disabled children's long-term support program, as defined in s. 46.011 (1g).

(END)

D-note

2009-2010 DRAFTING INSERT FROM THE LEGISLATIVE REFERENCE BUREAU

LRB-1542/3insRLR:...:

1 Ins 2-7:

****Note: This is reconciled s. 20.435 (4) (o). This Section has been affected by drafts with the following LRB numbers: 1542 and 1707.

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRB-1542/3dn RLR:..... ∿₩∩

Date

This draft reconciles LRB-0707/P5 and 1542/2. All of these drafts should continue to appear in the compiled bill.

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DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRB-1542/3dn RLR:nwn:jf

January 30, 2009

This draft reconciles LRB-0707/P5 and -1542/2. All of these drafts should continue to appear in the compiled bill.

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State of Misconsin 2009 - 2010 LEGISLATURE

LRB-1542/3 RLR:nwn:jf

DOA:.....Palchik, BB0422 - Birth to 3 waiver

FOR 2009-11 BUDGET -- NOT READY FOR INTRODUCTION

AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

Currently, DHS administers the Birth to 3 Program to provide early intervention services to infants and toddlers with developmental delays or disabilities and to their families.

This bill requires DHS to request a waiver of federal Medicaid law to allow the state to provide home and community-based services under MA to children who participate in the Birth to 3 Program. The bill provides that if the waiver is granted, counties must pay the nonfederal share of MA costs for services provided under the waiver. The bill appropriates a specified amount of federal MA moneys received for services provided under the waiver to DHS for administering the waiver, and provides that DHS must distribute the remainder of those federal moneys to counties that provide services under the waiver.

For further information see the **state and local** fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 20.435 (4) (o) of the statutes is amended to read:

20.435 (4) (o) Federal aid; medical assistance. All federal moneys received for meeting costs of Medical Assistance administered under ss. 46.284 (5) and 49.665 and subch. IV of ch. 49, to be used for those purposes and, for transfer to the Medical Assistance trust fund, for those purposes, for transfer to the appropriation account under sub. (5) (kx) for the purposes specified under sub. (5) (kx), and to transfer to the appropriation account under s. 20.435 (7) (im) \$19,100 in fiscal year 2009–10 and \$20,900 in fiscal year 2010–11.

****Note: This is reconciled s. 20.435 (4) (o). This Section has been affected by drafts with the following LRB numbers: -1542/2 and -0707/P5.

SECTION 2. 20.435 (7) (im) of the statutes is amended to read:

20.435 (7) (im) Community options program; family care benefit; recovery of costs; birth to 3 waiver administration. From the moneys received from the recovery of costs of care under ss. 46.27 (7g) and 867.035 and under rules promulgated under s. 46.286 (7) for enrollees who are ineligible for medical assistance, all moneys not appropriated under sub. (4) (in), and all moneys transferred to this appropriation account from the appropriation account under sub. (4) (0), for payments to county departments and aging units under s. 46.27 (7g) (d), payments to care management organizations for provision of the family care benefit under s. 46.284 (5), payment of claims under s. 867.035 (3) and, payments for long-term community support services funded under s. 46.27 (7) as provided in ss. 46.27 (7g) (e) and 867.035 (4m), and for administration of the waiver program under s. 46.99.

****NOTE: This Section involves a change in an appropriation that must be reflected in the revised schedule in s. 20.005, stats.

Section 3. 46.99 of the statutes is created to read:

- **46.99** Medical assistance waiver for Birth to 3 participants. (1) In this section, "medical assistance" means the program under subch. IV of ch. 49.
- (2) The department shall request from the secretary of the U.S. department of health and human services a waiver under 42 USC 1396n (c) that authorizes the provision of home or community-based services under medical assistance to children who are eligible for medical assistance and receive early intervention services under s. 51.44.
- (3) If the waiver requested under sub. (2) is granted, counties shall provide the nonfederal share of costs for medical assistance services provided under the waiver. Counties may use moneys appropriated under s. 20.435 (7) (bt) and distributed to counties under s. 51.44 (3) (a) to provide the nonfederal share of medical assistance costs.
- (4) From the appropriation account under s. 20.435 (4) (o), the department shall distribute to counties that provide services under this section the amount of federal moneys received by the state as the federal share of medical assistance for those services, minus the amount transferred to the appropriation account under s. 20.435 (7) (im) for the department's costs of administering this section. Counties shall use moneys distributed under this section to provide services under this section or s. 51.44.

SECTION 4. 49.46 (2) (b) 8. of the statutes is amended to read:

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